A/R 5-255



OFFICE OF EMERGENCY MEDICAL SERVICES

Administrative Requirements Manual

Effective: 5/96; cites updated 3/07 Authorization: LG Page: 1 of 2

A/R Title: ALS Inter-Hospital Staffing Waiver

Supersedes: N/A

PURPOSE:

- 1. To define procedures and criteria for review and approval of Paramedic/Basic Staffing Waivers for Advanced Life Support (ALS) Inter-Hospital Transfers at the EMT-Paramedic level of care.
- 2. To amend minimum staffing requirements promulgated in the Department's Administrative Requirement, A/R 5-509, "ALS Interfacility Transfers," to permit, upon securing a waiver, EMT-Paramedic/EMT-Basic staffing for ALS-Paramedic inter-hospital transfers.

DEFINITION:

"Advanced Life Support (ALS) Inter-Hospital Transfer" shall mean the transport by ambulance from a hospital to another care facility of a sick or injured patient requiring medical treatment and/or the monitoring of on-going medical treatment consistent with the scope of practice of EMT-Intermediates or EMT-Paramedics, or EMT-Basics if a waiver of staffing requirements has been issued.

PROCEDURE:

Pursuant to 105 CMR 170.305(C)(3)(a)3., an ambulance service licensed at the ALS-Paramedic level may be granted a waiver under 105 CMR 170.275(B) and 105 CMR 170.305(C)(3) to provide ALS services at the Paramedic level for ALS-Paramedic inter-hospital transfers with an ambulance staffed with one EMT-Paramedic and one EMT-Basic, provided that all of the following conditions are met:

- 1. Ambulance Service Requirements
 - a. meet all other requirements for the provision of EMT-Paramedic level care pursuant to the Massachusetts EMS Regulations, 105 CMR 170.000, and comply with the Department's policies regarding the transport of inter-hospital transfer patients as established by A/R 5-509, "ALS Interfacility Transfers."
 - ambulance services and/or their EMTs shall decline the inter-hospital transfer when the EMTs are not adequately equipped, prepared or trained to provide the level of care required or anticipated by the patient's medical condition unless the hospital has provided appropriate medical personnel;
 - c. ensure through ALS/BLS Interface training programs approved by OEMS and provided to all EMT personnel, that the treatment provided by each EMT is consistent with the level of training and certification of each EMT;
 - d. participate in an ongoing evaluation program utilizing evaluation methodologies based upon a minimum data set and a reporting program approved by the OEMS; and

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e. make request for such waiver in writing to OEMS, including, but not limited to, copies of a current, valid affiliation agreement for medical control; ALS/BLS interface training curriculum; and written polices and procedures pertaining to the implementation and ongoing evaluation of the provisions of the waiver.

2. Medical Control Requirements

- a. Medical Control and/or on-line Medical Direction must conform to requirements established in 105 CMR 170.300 (Affiliation Agreement section of EMS regulations); 105 CMR 130.1503 and 130.1504 (Hospital Licensure regulations, standards for affiliate hospital medical director and physicians providing on-line medical direction);
- b. the Medical Director for the ambulance service shall be responsible for quality review of each ALS Inter-Hospital Transfer completed under the provisions of this waiver;
- c. the Medical Director for the ambulance service shall oversee all training of personnel and ongoing quality improvement done in conjunction with the provisions of this waiver; and
- d. the Medical Control physician shall have the right to decline authorization for transfer of patients pursuant to this waiver and to require an EMT-Paramedic or EMT-Intermediate in place of an EMT-Basic, or other specialized personnel from the sending facility if indicated by the patient's condition, medications or need for specialized equipment during transport.